CLAIMS ONLY								Application Number Filing Date Applicants) Filing Date							
CLAIMS AS FILED AFTER FIRST AFTER SECOND								* May be used for additional claims or amendments							
	la da a			DMENT	AMEN	DMENT			·			,			
1	Indep	Depend	Indep	Depend	Indep	Depend		51	Indep	Depend	Indep	Depend	Indep	Depen	
2	-	,	— —	 	1	 		52	 	 	 	 	 	ļ	
3		i						53						<u> </u>	
4		`						54							
5 6			<u> </u>	<u> </u>				55							
7		!		ļ	-			56 57	<u> </u>			ļ		ļ	
8		-					- 1	58				 		 -	
9		1						59	 	i		 	 		
10							1	60							
11								61							
13		1					Ì	62 63							
14								64		i		 			
15								65							
16		-1						66							
17 18		-						67		L					
19		-						68 69				<u> </u>			
20		<u> </u>						70				 			
) 21								71							
								72							
23								73							
24 25	-	<u> </u>						74 75							
26								75 76							
27								77				-	_		
28								78							
29								79							
30 31								80 81							
32								82							
33								83				— —			
34								84							
35								85							
36 37								86							
38								87 88							
39							ı	89			··	 	-		
40								90			3				
41							I	91							
42							ļ	92							
43 44							ŀ	93 94							
45							ı	95							
46							Ì	96			-				
47								97							
48							J	98							
49 50								99			ļ. <u>-</u>				
Total	-73-					├ ,		100		<u> </u>				-	
Indep	3							Total Indep							
Total Depend	194		4		4	'	İ	Total Depend	4	<u>'</u>	4	<u>'</u>	4		
	2						- 1	Total Claims							

NW